BROADLAWNS MEDICAL CENTER

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Broadlawns Medical Center and the IowaCare Program

A Year In Review –





IowaCare Enrollment

- As of January 21, 2008, Broadlawns Medical Center is averaging per month approximately 6,137 patients enrolled in IowaCare.
- Broadlawns is eligible to serve 31 percent of all the individuals enrolled in this program.





IowaCare Disenrollment Issues

- As of January 21, 2008, 5,020 individuals were disenrolled in IowaCare statewide. 1,728 of these were in Polk County.
- Polk County has the highest level of disenrollement in the program statewide.
- Approximately 75 percent of all the individuals enrolled in lowaCare do not pay a premium.
- Approximately 864 of the individuals in Polk County who are disenrolled due to failure to pay their premiums will continue to be disenrolled since they have not paid premiums or declared hardship in the past.





IowaCare Disenrollment Issues

- Broadlawns is grateful to the Legislators for eliminating the premiums for the majority of our patients.
- Broadlawns would like to work with the Legislators this year to ensure those patients who have not paid or declared a hardship since the inception of the program and fall within the 0 – 100 % FPL can be forgiven of their back premiums.
- This would allow the patients to re-enroll in IowaCare rather than be uninsured.





Impact on the State of Disenrollement

- The Federal Match for the State of Iowa is based upon the dollar amount of claims that the State submits.
 - If there are fewer claims due to the disenrollment of patients, the State may be facing a greater budget shortfall.





Broadlawns' Financials

- Our claims grew by 12.2 percent this last fiscal year.
- During the last two fiscal years, Broadlawns Medical Center has been working diligently to reduce our cost and become more efficient. While this is a good business strategy for most payer contracts, this can have a negative impact for IowaCare since claims allocation is based on cost to charge.
- This will impact both Broadlawns and the State because the end result is a reduced amount of claims dollars for federal matching.
- The FY 2009 Budget packet sent out this week contains a table showing our costs per adjusted patient day have decreased approximately 2 percent from FY 2006 to Budget FY 2009 projections. However, preliminary numbers indicate Broadlawns may receive some additional appropriation for FY 2007 based on additional service volumes to lowaCare patients. This additional funding is very much needed as we see higher claims volumes for patients served.





Overall Increase In Total Claims

	FY 2006	FY 2007	Change
1. Gross Charges	\$26,944,000	\$29,453,000	\$2,509,000
2. Allowed Claims Amount	\$13,758,000	\$15,431,000	\$1,673,000



Additional Clinical Information





Health Risk Assessments and Physicals

- We have been offering physicals to the lowaCare patients. However, one issue prevents many of our patients from obtaining a physical. It is the same day billing rule.
- Frequently, when a patient comes to Broadlawns transportation is an issue. Under the current Medicaid billing rules if we see a patient for an acute medical condition and then provide a physical, we cannot bill for both of these services on the same day.





Health Risk Assessments and Physicals

- In order for the patient to receive the physical they would need to come back on a different day. This is a serious challenge for our patients with transportation issues.
- Broadlawns has recommended to DHS that an exception be made to the Same Day Billing rule so we can provide preventative physicals to our patients on IowaCare and in the Medicaid program.
- We have been keeping in contact with Des Moines University regarding the Health Risk Assessments provision of the IowaCare program.





Smoking Cessation Pharmaceuticals

- As of February 1, 2007, Broadlawns Medical Center has been providing Smoking Cessation Pharmaceuticals to our IowaCare patients.
- We are very appreciative of DHS working with us to provide this much needed service to our patients.
- We are concerned about how we implement the program in collaboration with Quitline Iowa. Patients will need to wait for approval from Quitline in order to receive their gum and/or patches.





Durable Medical Equipment and Pharmaceuticals Provided to IowaCare Patients

Broadlawns Medical Center has provided:

- Pharmaceuticals \$1,976,340 (January- December 2007)
- Durable Medical Equipment \$134,238 (January- December 2007)
- Total: \$2,110,578



28E Agreement Issues





- Broadlawns Medical Center does not have a signed 28E Agreement this year. The Department of Human Services has indicated that they can no longer pay us for the Administrative Costs to operate the IowaCare program. This has become a roadblock in reaching a current agreement.
- The legislation that created IowaCare is HF 841.
 According to HF 841, Iowa Code Section 249J.22,
 Health Care Transformation Account, money has been allocated to pay for administrative costs for the IowaCare program and this account is also referenced in our earlier 28E Agreements.





- Prior to IowaCare, Broadlawns Medical Center did not bill patients who did not qualify for the IowaCare program. It was critical during the initial development of IowaCare that Broadlawns be held harmless from any new or additional costs. The following information outlines the commitments that were made to Broadlawns to ensure that we were not going to see an increase in our costs with the implementation of IowaCare.
- A letter dated August 17, 2005, from Broadlawns to Representative Heaton during the initial implementation of the IowaCare program memorializes the promises that were made by the Department of Human Services to hold Broadlawns harmless in the distribution of moneys from the IowaCare Account and payment of new administrative costs from the Health Care Transformation Account.





- An email dated September 21, 2007, from Jennifer Vermeer, Assistant Director of Medicaid, Department of Human Services supports this. Ms. Vermeer stated: "The state share for your admin payments has already been allocated in the budget, but what was formerly the federal share has not." This is inconsistent with the memo dated December 7, 2007, that Kevin Concannon sent to legislators regarding the budgeting for our administrative costs. If the Department of Human Services was not planning to pay the administrative costs to Broadlawns Medical Center, why have they again placed the costs in their budget?
- In a letter dated November 21, 2007, Norene Jacobs, Esq., legal counsel for Broadlawns Medical Center, noted extensive research of statues and legislative materials that clearly authorizes – obligate the Department of Human Services to compensate Broadlawns Medical Center for administrative costs.





Finally, on page 77 in the Summary of FY 2009 Budget and Department Request that was sent to the Fiscal Services Division of the Legislative Services Agency this month, the Department of Human Services is requesting an increase of \$202,000 for the administrative costs for the IowaCare program. We believe there should be sufficient funding to continue to pay us for the administrative costs associated with the IowaCare program that the Department of Human Services has been appropriately paying Broadlawns Medical Center since the inception of the IowaCare program. Broadlawns Medical Center has acted in good faith working in collaboration with the State of Iowa to develop and work to ensure the success of the IowaCare Medicaid Waiver. In fact, approximately 31 percent of all the care provided in the State under the IowaCare program is provided at Broadlawns Medical Center.





Questions?

